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Sequence Number: 01-07-14

Notice ID(s): 2116

File Date: 11/9/14

## Notice of Rulemaking Hearing

Hearings will be conducted in the manner prescribed by the Uniform Administrative Procedures Act, T.C.A. § 4-5-204. For questions and copies of the notice, contact the person listed below.

**Agency/Board/Commission:** Board of Optometry

**Division:**

Stefan Cange

**Contact Person:** Assistant General Counsel

**Address:** 665 Mainstream Drive, Nashville, Tennessee 37243

**Phone:** (615) 741-1611

**Email:** Stefan.Cange@tn.gov

Any Individuals with disabilities who wish to participate in these proceedings (to review these filings) and may require aid to facilitate such participation should contact the following at least 10 days prior to the hearing:

**ADA Contact:** ADA Coordinator

710 James Robertson Parkway,

**Address:** Andrew Johnson Building, 5<sup>th</sup> Floor, Nashville, Tennessee 37243

**Phone:** (615) 741-6350

**Email:** Tina.M.Harris2@tn.gov

**Hearing Location(s)** (for additional locations, copy and paste table)

Address 1:	Metro Center		
Address 2:	665 Mainstream Drive-Poplar Room		
City:	Nashville, Tennessee		
Zip:	37228		
Hearing Date :	06/11/2014		
Hearing Time:	9:00 A.M.	<input checked="" type="checkbox"/> CST/CDT	<input type="checkbox"/> EST/EDT

**Additional Hearing Information:**

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**Revision Type (check all that apply):**

☒ Amendment

☐ New

☐ Repeal

**Rule(s)** (ALL chapters and rules contained in filing must be listed. If needed, copy and paste additional tables to accommodate more than one chapter. Please enter only **ONE** Rule Number/Rule Title per row.)

Chapter Number	Chapter Title
1045-02	General Rules Governing the Practice of Optometry
Rule Number	Rule Title
1045-02-.05	Continuing Education



1045-02  
General Rules Governing the Practice of Optometry

Amendments

Rule 1045-02-.05 Continuing Education is amended by deleting subparagraphs (1)(a) and (1)(b) in their entirety and substituting instead the following language, so that as amended, the new subparagraphs (1)(a) and (1)(b) shall read:

- (a) For those who are therapeutically certified, a minimum of twenty (20) of the thirty (30) hours of continuing education is required in courses pertaining to ocular disease and related systemic disease, as described in subparagraph (2)(c). At least two (2) of these twenty (20) hours shall be a course or courses designed specifically to address prescribing practices.
- (b) Each licensee shall maintain current certification in cardiopulmonary resuscitation (CPR). Such certification shall be obtained from a course approved or offered by the American Heart Association, the American Red Cross, or any other entity approved by the board.

**Authority:** T.C.A. §§4-5-202, 4-5-204, 63-1-107, 63-8-112, 63-8-119, and 63-8-120.

Rule 1045-02-.05 Continuing Education is amended by deleting subparagraph (2)(c) in its entirety and substituting instead the following language, so that as amended, the new subparagraph (2)(c) shall read:

- (c) Any one (1) or two (2) hour course designed specifically to address prescribing practices must be pre-approved by the Board.

**Authority:** T.C.A. §§4-5-202, 4-5-204, 63-1-107, 63-8-112, 63-8-119, and 63-8-120.

Rule 1045-02-.07 Diagnostic and Therapeutic Certification is amended by deleting subparagraph (3)(d) in its entirety and substituting instead the following language, so that as amended, the new subparagraph (3)(d) shall read:

- (d) No therapeutically certified optometrist shall use pharmaceutical agents by injection except to counter anaphylaxis until they have received approval from the board. The board will not approve the use of injections until the optometrist demonstrates to the board's satisfaction sufficient educational training and/or clinical training, and submits proof of current certification in cardiopulmonary resuscitation (CPR). The education must be obtained from a course approved or offered by the American Heart Association, the American Red Cross, or any other entity approved by the board.

**Authority:** T.C.A. § 4-5-202, 4-5-204, 63-8-102, 63-8-112, and 63-8-115.

I certify that the information included in this filing is an accurate and complete representation of the intent and scope of rulemaking proposed by the agency.

Date:

1/9/14

Signature:

*[Handwritten Signature]*

Name of Officer: Stefan Cange

Assistant General Counsel

Title of Officer: Department of Health

Subscribed and sworn to before me on:

1-9-14

Notary Public Signature:

*[Handwritten Signature: Suzanne McElroast]*

My commission expires on:

MY COMMISSION EXPIRES  
APRIL 19, 2017

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Filed with the Department of State on:

1/9/14

*[Handwritten Signature: Tre Hargett]*

Tre Hargett  
Secretary of State

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